

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name <u>City of San Jose</u>		RECEIVED San Jose City Clerk CTC CT 2018 JAN -3 PM 1:15	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>			
Designated Agency Contact (Name, Title) <u>Shelley Opsal - Secretary to Mayor</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number <u>408 535-3899</u>	E-mail <u>Shelley.Opsal@sanjoseca.gov</u>	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ \$ 63.00

Event Description: US Figure skating Date(s) 1, 3, 18
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: S.J. Sports Authority
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
	Mayor Sam Liccardo	3	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: <u>Mayor to Speak - Welcome</u>
	Ted Truillo (security)		
	Jessica Garcia - Kohl (wife)		
C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

[Signature] Sam Liccardo Mayor 1/3/18
 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____